

● PRINTER RUSH ●

(PTO ASSISTANCE)

Application : <u>10/691,510</u>	Examiner : <u>Walberg</u>	GAU : <u>3753</u>
From: <u>28</u>	Location: <u>IDC</u> FMF FDC	Date: <u>12/13/05</u>
Tracking #: <u>EPM 10/691,510</u> Week Date: <u>12/5/2005</u>		

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input checked="" type="checkbox"/> CLM	<u>10/6/05</u>	<input type="checkbox"/> Document Legibility
<input checked="" type="checkbox"/> IIFW	<u>11/30/05</u>	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input type="checkbox"/> Other
<input type="checkbox"/> DRW	_____	
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Renumbered claim 1 (original claim 4) depends on original claim 1 (Renumbered claim 2), No Independent claim. please resolve.

Thank you.

[XRUSH] RESPONSE: _____

INITIALS: _____

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.
REV 10/04